

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

Received
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FEB 15 2011

Please type or print in ink.

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Gomez

James

Benjamin

1. Office, Agency, or Court

Agency Name

City of La Habra

Division, Board, Department, District, if applicable

Your Position

City Council

Councilmember

► If filing for multiple positions, list below or on an attachment.

Agency: See Attached

Position: Director & Delegate

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☒ County of Orange

☒ City of La Habra

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is _____, through December 31, 2010.

☐ Leaving Office: Date Left _____
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date _____

☐ The period covered is _____, through the date of leaving office.

☐ Candidate: Election Year _____

Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5.

I have used all reasonable diligence in preparing this statement. I have reviewed it herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed

2/15/2011
(month, day, year)

Signature

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Gomez, James

▶ **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Sam Sung Church

ADDRESS (Business Address Acceptable)

951 South Beach Blvd., La Habra, CA 90631

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Church

YOUR BUSINESS POSITION

Consultant/English Ministry

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

▶ **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

City of La Habra

ADDRESS (Business Address Acceptable)

201 E. La Habra Blvd., La Habra, CA 90631

BUSINESS ACTIVITY, IF ANY, OF SOURCE

City

YOUR BUSINESS POSITION

Councilmember

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

▶ **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Gomez, James

NAME OF SOURCE <u>Chevron Corp.</u>		
ADDRESS (Business Address Acceptable) <u>145 S. State College</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Brea CA / Korean Breakfast</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/3/2010</u>	<u>\$33.86</u>	<u>Breakfast</u>
<u>9/3/2010</u>	<u>\$45.00</u>	<u>Transportation</u>
<u> </u>	<u>\$78.86</u>	<u>Total</u>

NAME OF SOURCE <u>Richard D Jones</u>		
ADDRESS (Business Address Acceptable) <u>3777 N. Han Bor</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>La Habra Council</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3/14/2010</u>	<u>75.00</u>	<u>Dinner</u>
<u>12/31/2010</u>	<u>50.00</u>	<u>Dinner</u>
<u> </u>	<u>\$ </u>	<u> </u>

NAME OF SOURCE <u>Westridge Golf Club</u>		
ADDRESS (Business Address Acceptable) <u>1400 S. La Habra Hills</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Hotel Meetings</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/1/2010</u>	<u>\$100.00</u>	<u>meals</u>
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>

NAME OF SOURCE <u>Fullerton Union High School Dist</u>		
ADDRESS (Business Address Acceptable) <u>1051 West Bastanchury</u>		
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Fullerton CA</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/2010</u>	<u>150.00</u>	<u>Annual Pss School Events</u>
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>

NAME OF SOURCE		
ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>

NAME OF SOURCE		
ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>

Comments: _____

FORM 700 – ATTACHMENT

FILER'S NAME: JAMES GOMEZ, COUNCILMEMBER

FILING PERIOD: 1/1/10 – 12/31/10

I am filing an expanded statement as Director of the following agencies within the jurisdiction of the City of La Habra:

REDEVELOPMENT AGENCY OF THE CITY OF L A HABRA
LA HABRA CIVIC IMPROVEMENT AUTHORITY
LA HABRA HOUSING AUTHORITY
LA HABRA UTILITY AUTHORITY

I am filing an expanded statement as Delegate of the Orange County City Selection Committee and a Delegate of the Orange County Vector Control.